United Nations ST/AI/2000/10

Secretariat

21 September 2000

Administrative instruction

Medical evacuation

The Under-Secretary-General for Management, pursuant to section 4.2 of Secretary-General's bulletin ST/SGB/1997/1, and for the purpose of establishing conditions and procedures for the authorization of travel expenses on medical grounds, under staff rules 107.1 (a) (vii) and 107.2 (a) (vii), 207.1 (vi) and 207.2 (a) (v), and 307.1 (c) promulgates the following.

Section 1
General provisions

1.1 The present instruction shall apply to staff members appointed under the 100, 200 and 300 series of the Staff Rules.

1.2 Procedures specific to medical evacuation of staff members serving with peacekeeping operations are set out in the annex to the present instruction.

Section 2
Eligibility for medical evacuation

2.1 Internationally recruited staff members under the 100, 200 and 300 series of the Staff Rules may be evacuated in case of an acute illness or injury from the duty station or mission area at United Nations expense for the purpose of securing essential medical care or treatment which cannot be secured locally because of inadequate medical facilities. This provision also applies to eligible family members of internationally recruited staff members under the 100 and 200 series of the Staff Rules.

2.2 Internationally recruited staff members and their eligible family members should plan all elective surgical, medical and dental procedures in conjunction with their home leave or family visit travel, and sick leave will be certified in accordance with relevant provisions of the Staff Rules.

2.3 Locally recruited staff members under the 100, 200 and 300 series of the Staff Rules, for whom the Organization has not assumed a responsibility for relocation to or from the duty station, are expected to avail themselves of the medical facilities available locally. However, when an acute life-threatening medical emergency has occurred, medical evacuation will be considered when the available local facilities do not offer an adequate response to the medical emergency. This provision will also

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apply to eligible family members of locally recruited staff members under the 100 and 200 series of the Staff Rules.

2.4 Eligible family members, for purposes of medical evacuation, shall be deemed to comprise a spouse and recognized dependent children for whom the staff member receives a dependency allowance or special dependency allowance. A secondary dependant shall not be eligible for medical evacuation.

2.5 A staff member on special leave without pay, and his or her dependants, shall not be eligible for medical evacuation.

2.6 Guidelines for physicians advising on medical evacuation will be outlined in an information circular.

Section 3
Requirements for an escort

3.1 A physician or a nurse may be authorized to escort the person approved for medical evacuation under section 2 (the "evacuee") when *medical attention* is required during travel. This authorization does not preclude an escort as defined in sections 3.2 and 3.3.

3.2 A family member may be authorized to travel with the evacuee under the following circumstances:

(a) In psychiatric cases;

(b) For children up to 18 years old;

(c) For evacuees who cannot look after themselves (for example, stretcher or paralytic cases).

3.3 In transplant cases, a donor may be authorized to accompany the evacuee. If required, this person may also act as an escort as defined in section 3.2 (c).

Section 4
Authority to approve medical evacuation

4.1 Authority to approve medical evacuation is delegated to heads of departments or offices away from Headquarters. The decision to evacuate shall be taken upon the recommendation of the United Nations medical officer or the United Nations dispensary physician responsible for the provision of medical services to the department or office concerned. At duty stations where there is no United Nations medical officer or United Nations dispensary physician, the decision shall be taken upon the recommendation of a local United Nations examining physician.

4.2 (a) The period spent on medical evacuation shall normally not exceed 45 days. For medical evacuations expected to exceed 45 days, or for any extension of medical evacuations beyond 45 days, authorization must be obtained from the United Nations Medical Director. For this purpose, the head of department or office shall forward all relevant medical documentation to the United Nations Medical Director.

(b) The United Nations Medical Director is available for consultation and assistance in all cases.

Section 5
Place to which medical evacuation may be authorized — travel costs

5.1 Medical evacuation shall normally be authorized to the nearest recognized regional medical centre. A list of these centres will be issued in an information circular.

5.2 Medical evacuation for internationally recruited staff members in cases of illness or injury requiring a long period of convalescence, psychiatric condition or high-risk pregnancy shall be authorized to the country of home leave, or the country of family leave travel, or the alternate country of home leave as provided in the Staff Rules.

5.3 When, in preparing for medical evacuation in accordance with section 6, difficulties arise that would prevent the applicable requirements from being met in the receiving country, an alternative destination within the region shall be authorized.

5.4 Travel costs for medical evacuation authorized under sections 5.1, 5.2 and 5.3 shall be borne in full by the Organization in respect of the evacuee and any escort authorized under section 3.

5.5 The staff member may choose, as an alternative to the place of evacuation under sections 5.1 and 5.3, to be evacuated to:

(a) The country of home leave, or the country of family leave travel, or the alternate country of home leave as provided in the Staff Rules, for internationally recruited staff members;

(b) Any other country of the staff member's choice.

5.6 Travel costs for medical evacuation authorized under section 5.5 shall be borne by the Organization subject to the following provisions:

(a) Travel costs for the staff member and any eligible family member to the country of home leave, or the country of family leave travel, or the alternate country of home leave as provided in the Staff Rules, shall be paid in the form of advance home leave or family visit, provided all applicable requirements for each of those entitlements are met;

(b) Travel costs in excess of those required for evacuation to a place authorized under sections 5.1 and 5.3 shall be borne by the staff member:

(i) When the staff member has already exhausted his or her home leave or family visit entitlement;

(ii) When the staff member elects to be evacuated to a country of his or her choice.

5.7 Subsistence allowance payments in the country of evacuation shall be governed by the provisions of section 8.

Section 6
Preparations for the evacuation

6.1 *Medical information is confidential and should be treated as such, whether within offices or in the transmission to other offices or medical facilities.*

6.2 Prior to medical evacuation, the head of department or office from which the staff member or eligible family member is being evacuated shall consult with the relevant United Nations Office in the receiving country, to ensure that all necessary preparations are made and that all visa and other requirements can be met. In accordance with section 5.3, an alternative destination within the region shall be authorized in case of any difficulty with meeting applicable requirements in the receiving country.

6.3 When evacuation is authorized, the essential information should be sent in advance to the head of office of the staff member's organization in the receiving country, where applicable, or to the Resident Coordinator of the United Nations system's operational activities for development in the receiving country. The information given should indicate whether, upon arrival, hospitalization is necessary and urgent, whether provisions should be made for transport by ambulance, and into which hospital and department the patient should be admitted. Whenever medically possible, travel should not commence until the appointment with the desired specialist has been made. The evacuee should travel with all relevant medical documents.

Section 7
Leave status

7.1 While on medical evacuation, the staff member's absence is charged to sick leave entitlements.

7.2 If the staff member accompanies a family member on medical evacuation, the absence from the duty station shall be charged to family leave, annual leave or special leave, as appropriate.

Section 8
Subsistence allowance during medical evacuation

8.1 In accordance with staff rules 107.15 (h), 207.16 and 307.4 (a), where travel at United Nations expense is authorized for medical reasons, a daily subsistence allowance shall be paid under the conditions and at the rates specified below.

8.2 When medical evacuation is authorized to the nearest recognized regional centre under section 5.1, or to an alternative place of evacuation authorized under section 5.3, a subsistence allowance shall be paid as follows when the place of evacuation is outside the staff member's country of home leave, or family leave travel, or alternate place of home leave as provided in the Staff Rules:

(a) For the evacuee, when not hospitalized, the full rate of subsistence allowance applicable to the authorized destination, and when hospitalized, one third of the applicable rate;

(b) For the family member authorized to accompany the evacuee, one half of the full rate if the evacuee is not hospitalized, and the full rate if the evacuee is hospitalized;

(c) Whether the staff member is the evacuee or the escort, the normal adjustments in subsistence allowance for staff members at the D-1 level and above shall not apply to the subsistence allowance for medical evacuation;

(d) In transplant cases, the donor does not qualify for subsistence allowance, unless that person is also acting as an escort, as defined in section 3.2 (c).

8.3 When, in accordance with sections 5.2 and 5.5 (a), medical evacuation is authorized to the country of home leave, family leave, or alternate place of home leave as provided in the Staff Rules, actual expenses for a hotel room or other accommodations (meals included) incurred by the evacuee and the accompanying family member authorized under section 3.2 may be reimbursed on the basis of receipts. The maximum reimbursement rates in respect of expenses shall be one half of the full daily subsistence allowance for that location.

8.4 When, in accordance with section 5.5 (b), medical evacuation is to a place of the staff member's choice, payment of subsistence allowance shall be made under section 8.2, provided, however, that such payment does not exceed the amount that would have been paid had the evacuation been to the place authorized under sections 5.1 or 5.3. Any additional subsistence expenses in respect of an accompanying physician, nurse, family member or donor authorized under section 3 shall be the responsibility of the staff member.

8.5 Payment of subsistence allowance under sections 8.2, 8.3 and 8.4 shall normally be made for a maximum period of 45 days, unless a longer evacuation period has been authorized in accordance with section 4.2 (a). In accordance with the provisions of the administrative instruction on the system of daily subsistence allowance (ST/AI/1998/3), the applicable rate shall be subject to reduction after 30 days in New York, and after 60 and 120 days at all other duty stations.

8.6 For all evacuations, if a medical escort is authorized under section 3.1, the full rate of subsistence allowance applicable to the authorized destination shall be paid to an accompanying doctor or nurse, but limited to three days, including travel time.

Section 9
Medical expenses

9.1 Medical expenses incurred for treatment of the evacuee (for example, hospitalization charges, doctor/surgeon fees and laboratory tests) are the responsibility of the staff member.

9.2 However, when the evacuee's medical condition is attributable to the performance of official duties on behalf of the United Nations, the Organization shall reimburse to the staff member all reasonable medical, hospital and directly related costs in accordance with the provisions of appendix D to the Staff Rules.

Section 10
Record-keeping

10.1 Once the head of department or office has approved the medical evacuation of a staff member or an eligible family member, the United Nations medical officer, United Nations dispensary physician or United Nations examining physician who recommended the evacuation is requested to complete the "medical evacuation" form (MS.39), and forward it to the United Nations Medical Director. The MS.39 form will be provided in an information circular.

10.2 Within two weeks upon return of the evacuee to the duty station, a complete medical report delivered by the attending physician at the place of evacuation shall

be forwarded to the Medical Service where the staff member's file is kept, as well as to the United Nations Medical Director. The record shall include all supporting documentation that may have been submitted under section 4.2 (a) to justify a request for medical evacuation in excess of 45 days.

10.3 Written record shall be kept by heads of department or office of each medical evacuation setting out the following information:

(a) The name of the staff member, index number, name of the organization, locally or internationally recruited;

(b) The name of the dependant and his or her relation to the staff member, if the evacuee was not the staff member;

(c) The name of the head of department or office who authorized the evacuation;

(d) The place of evacuation authorized by the head of department or office;

(e) The actual place of evacuation;

(f) The total cost of the medical evacuation, including travel expenses, subsistence allowance and medical costs.

The related information shall be provided in accordance with guidelines to be set out in an information circular.

10.4 The heads of department or office shall forward the above statistics on medical evacuations to the United Nations Medical Director on a quarterly basis. The United Nations Medical Director will regularly review these statistics and will, as and when necessary, provide the heads of department or office with his comments and advice.

10.5 The United Nations Medical Director will, on an annual basis, provide all relevant offices at Headquarters with statistics on medical evacuations and any comments that are deemed necessary.

Section 11
Final provision

The present instruction shall enter into force on 1 October 2000.

(*Signed*) Joseph E. **Connor**
Under-Secretary-General for Management

Annex

Specific provisions for personnel serving with peacekeeping missions

1. Unless otherwise stipulated hereafter, all the conditions for the authorization of travel expenses on medical grounds, and procedures to be followed for arranging medical evacuations, as set out in ST/AI/2000/10, shall apply to staff members of peacekeeping missions recruited under the 100, 200 and 300 series of the Staff Rules, as well as to United Nations Volunteers serving with peacekeeping missions, civilian police, military observers and members of national military contingents.

Eligibility for medical evacuation

2. All internationally recruited civilian and military personnel may be evacuated at United Nations expense. Locally recruited staff members serving with peacekeeping missions may be evacuated for life-threatening medical conditions at United Nations expense.

3. For medical evacuation from established family missions, the provisions of section 2 of ST/AI/2000/10 will apply.

Authority to approve medical evacuation

4. All medical evacuations within the mission area are the responsibility of the Head of the Mission or the Chief Administrative Officer in consultation with the Force Medical Officer or the Chief Medical Officer.

5. Authority to approve emergency medical evacuations to recognized regional medical centres is delegated to the Head of Mission or the Chief Administrative Officer in consultation with the Force Medical Officer or the Chief Medical Officer.

6. All emergency medical evacuations to places other than recognized regional medical centres, medical evacuations by air ambulance, non-emergency medical evacuations, as well as all repatriations on medical grounds of military observers, civilian police and members of national military contingents require the prior approval of the United Nations Medical Director.

Place to which medical evacuation may be authorized

7. Medical evacuation shall normally be authorized to the nearest recognized regional medical centre.

8. For an illness or injury requiring a long period of convalescence or for a psychiatric condition, medical evacuation or repatriation to the country of home leave or family visit or to the parent duty station is recommended. It requires the prior approval of the United Nations Medical Director.

9. Although members of national military contingents are expected to be repatriated to their home country for level III and level IV care, as set out in the Medical Support Manual for United Nations Field Operations, medical evacuation may be authorized to a third country when the home country does not offer adequate medical facilities for the treatment of the medical condition in question. The prior approval of the United Nations Medical Director is required.

Return to duty station

10. In all cases of emergency medical evacuation, clearance to return to the mission area shall be obtained from the United Nations Medical Director. This clearance will be based on a complete medical report obtained from the attending physician at the place of evacuation.

11. In cases of non-emergency medical evacuation, return to the mission area does not require clearance from the United Nations Medical Director, unless otherwise indicated at the time of approval of the evacuation.

12. In cases of medical repatriation, return to the mission area, if requested, shall require the prior approval of the United Nations Medical Director.

Subsistence allowance

13. The provisions of section 8 of ST/AI/2000/10 shall apply to staff members serving on peacekeeping missions who are medically evacuated. When a subsistence allowance is payable during medical evacuation, retained accommodation may be reimbursed as provided in section 8.3 of ST/AI/1997/6, but mission subsistence allowance shall not be payable for the same period.

Medical expenses

14. The United Nations is responsible for all reasonable and customary medical bills pertaining to the treatment of civilian police, military observers and members of national military contingents, when the injury or illness is deemed to be service-incurred.

15. The United Nations is responsible for that portion of reasonable and customary medical bills pertaining to the treatment of civilian personnel not covered by a medical insurance carrier when the injury or illness is deemed to be service-incurred, and when the staff member is in travel status (that is, in receipt of mission subsistence allowance).

Record-keeping

16. Except for medical evacuations within the mission area, a complete medical report established by the physician in attendance in the mission and subsequently, at the place of evacuation, shall be forwarded to the United Nations Medical Director.